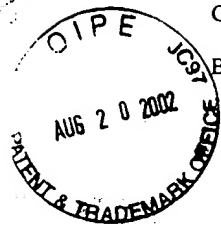


I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON, D.C. 20231, ON THE DATE INDICATED BELOW.

BY: [Signature] Gary D. Colby DATE: 9 August 2002



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re: Patent Application of : Group Art Unit: 1647
Horst Peschel :
Appln. No.: 09/596,507 : Examiner:
Filed: June 19, 2000 : Robert Hayes, Ph.D.
For: BRAIN TISSUE DERIVED FROM : Attorney Docket
NEURONAL PRECURSOR CELLS, : No. 600574-1
IT'S USE AS TRANSPLANT AND A :
METHOD OF PREPARATION THEREOF :

RECEIVED
AUG 22 2002
TECH CENTER 1600/2901

AMENDMENT TRANSMITTAL LETTER

Transmitted herewith is an Amendment in the above-identified application.

**COPY OF PAPERS
ORIGINALLY FILED**

- ☐ Substitute Specification.
- ☒ Small Entity status:
- ☒ has previously been claimed/established.
- ☐ is hereby claimed under 37 C.F.R. §1.27, as ☐ an Independent Inventor, or ☐ a Small Business Concern, or ☐ a Non-Profit Organization.

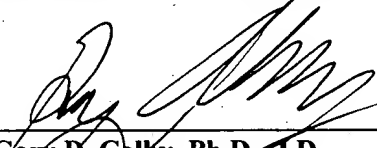
The additional claim fees have been calculated as follows:

| | | | | | SMALL ENTITY | | LARGE ENTITY | |
|--|---|-----|---------------------------------------|------------------|--------------|------------|--------------|---------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDIT. FEE | RATE | ADDIT. FEE |
| TOTAL | 41 | (-) | 25 | 16 | x\$9 | 144 | x\$18 | |
| INDEP. | 3 | (-) | 3 | 0 | x\$42 | 0 | x\$84 | |
| <input type="checkbox"/> 1st PRESENTATION OF MULTIPLE DEPENDENT CLAIMS | | | | | +\$140 | 0 | +\$280 | |
| | | | | | TOTAL | \$ 144.00 | TOTAL | |

The additional claim fees are being paid by:

- ☐ A check in the amount of \$ _____.00.
- ☒ Authorization to charge and/or credit **Deposit Account No. 50-1017 (Billing N . 600574.0001)** as noted below. A duplicate copy of this sheet is enclosed.
- ☒ Any overpayments or deficiencies in the above-calculated fee.
- ☒ Additional claim fee in the amount of \$144.00 as calculated above.
- ☒ Any additional fees required under 37 C.F.R. § 1.16 and/or § 1.17.
- ☒ In the event that a Petition for Extension of Time is required, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account.

CORRESPONDENCE ADDRESS

9 August 2002 By: 
(Date)

Gary D. Colby, Ph.D., J.D.

Registration No. 40,961

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